

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 140

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Courtney for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anne Evans Mailing Address 2 Olde Hall Road City Hebron State CT Zip Code 06248 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PSE Occupation Manager Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID: C14672</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Farrell Mailing Address 70 Ridgeview Place City Cheshire State CT Zip Code 06410 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer urix Occupation president ofhealth care technology com Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID: C14940</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Halley S Faust Mailing Address 5 Timrod Lane City West Hartford State CT Zip Code 06107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Jerome Capital, LLC Occupation venture capital Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 7 <b>Transaction ID: C14583</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....